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OMB No 1545-0047

Form 990	Return of Organization Exempt From Income Tax
₩3	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Department of the Treasur	▶ Do not enter social security numbers on this form as it may be made public

orm as it may be made public Open to Public ▶ Information about Form 990 and its instructions is at www IRS gov/form990 Internal Revenue Service Inspection For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017 C Name of organization US Chamber Institute for Legal Reform D Employer identification number B Check if applicable ☐ Address change 52-2109035 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Application pending (202) 463-5590 City or town, state or province, country, and ZIP or foreign postal code Washington, DC 20062 **G** Gross receipts \$ 42,321,723 Name and address of principal officer H(a) Is this a group return for Stan M Harrell □Yes ☑No subordinates? 1615 H Street NW H(b) Are all subordinates Washington, DC 20062 ☐ Yes ☐No included? Tax-exempt status ☐ 501(c)(3) **☑** 501(c) (6) **◄** (insert no) 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ▶ www legalreformnow com L Year of formation 1998 M State of legal domicile VA K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities We are a national campaign representing (Please see Schedule O for the continuation) the nation's business community with the critical mission of making America's legal system simpler, fairer and faster for everyone Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . 3 26 4 25 Number of independent voting members of the governing body (Part VI, line 1b) 31 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) . 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 40,995,169 42,142,289 9 Program service revenue (Part VIII, line 2g) . 9,700 11,600 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . 134,576 67,834 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 142,000 100,000 41,281,445 42,321,723 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3). 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 7,692,985 7,731,058 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 1,000,000 1,800,000 **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 30,420,973 30,808,405 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 39,113,958 40,339,463 19 Revenue less expenses Subtract line 18 from line 12 . 2,167,487 1,982,260 Net Assets or Fund Balances Beginning of Current Year End of Year 20 Total assets (Part X, line 16) . 27,210,697 29,192,957 21 Total liabilities (Part X, line 26) . 22 Net assets or fund balances Subtract line 21 from line 20 29,192,957 27,210,697 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2018-11-10 Signature of officei

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Paid	
Prepare	r
-	
<b>Use Onl</b>	У

Sign Here

Paid	Print/Type preparer's name Jennifer Rhoderick	Preparer's signature Jennifer Rhoderick	Date	Check If	PTIN P00395735		
Preparer	Firm's name Frnst and Young	Firm's EIN ► 34-6565596					
Use Only	Firm's address ▶ 111 Monument C	Firm's address ▶ 111 Monument Circle Ste 4000					
	Indianapolis, IN	46204					
May the IRS d	liscuss this return with the preparer	shown above? (see instructions)			. ☑Yes ☐No		

Stan M Harrell Treasurer and CFO Type or print name and title

Form	990 (2017)				Page <b>2</b>								
Par	t IIII Statem	ent of Program Service Ac	complishments										
	Check If	Schedule O contains a response of	note to any line in this Part III		🗆								
1		the organization's mission	•										
Prom	otes civil justice i	reform through legislative, political	, judicial, and educational activit	ties at both the national and local le	vels								
2	Did the organiza	Did the organization undertake any significant program services during the year which were not listed on											
	the prior Form 9		🗌 Yes 🗹 No										
	If "Yes," describ	pe these new services on Schedule	0										
3	Did the organiza	ation cease conducting, or make si	gnificant changes in how it cond	ucts, any program									
	services?	🗌 Yes 🗹 No											
	If "Yes," describ	f "Yes," describe these changes on Schedule O											
4	Section 501(c)		required to report the amount of	largest program services, as measi of grants and allocations to others, t									
	(Code	) (Expenses \$	ıncludıng grants of \$	) (Revenue \$	)								
	See Additional Dat	ta											
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)								
	See Additional Dat	ta											
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)								
	See Additional Dat	ta											
4d	Other program	services (Describe in Schedule O )											
	(Expenses \$	ıncludıng	grants of \$	) (Revenue \$	)								
4e	Total program	ı service expenses ▶											
					Form <b>990</b> (2017)								

or X as applicable

Section 501(c)(3) organizations.

Yes

Page 3

No

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Νo

Nο

Νo

No

No

No

Nο

No

Nο

Form **990** (2017)

Part IV Checklist of Required Schedules Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete 1 2 Yes Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Yes 3 for public office? If "Yes," complete Schedule C, Part I 📆 . . . . . . . . . . .

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 为

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 🔒 . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 . . . . . . . . . .

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 💆 . . . . . . . d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

b Was the organization included in consolidated, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

If "Yes," complete Schedule C, Part III 🥞 . . . . . . . . . . . . . . .

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year? 

**14a** Did the organization maintain an office, employees, or agents outside of the United States?

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

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11d

11e

11f

12a

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Yes

Yes

Yes

Yes

Yes

Yes

Form 990 (2017)							
Par	Part IV Checklist of Required Schedules (continued)						
			Yes	No			
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No			
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь					
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No			
L	Did the communication investigation of the communication of the communic						

24b

24c

24d

25a

25b

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28a

28b

28c

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Yes

Yes

Yes

Yes

Yes

Form 990 (2017)

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Nο

Nο

Νo

Νo

No

Nο

Nο

Nο

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

Did the organization maintain an escrow account other than a refunding escrow at any time during the year

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 🔧 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛸

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

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instructions for applicable filing thresholds, conditions, and exceptions)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			Page 2
Par	Check if Schedule O contains a response or note to any line in this Part V			<b>✓</b>
	Check if Schedule O contains a response of flote to any line in this Part V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1a   102		103	-110
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
Ī	(gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and			
	Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
_	Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			
	initialicial account in a foreign country (such as a bank account, securities account, or other initialicial account).	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were			
	not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	7a		
	provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
y	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form			
_	1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during			
	the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
4.~				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for			
	additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
r	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	,		orm <b>99</b>	<b>0</b> (2017

	390 (2017)			Page <b>c</b>
Par	<b>t VI</b> Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	ines
				<b>✓</b>
50	Check if Schedule O contains a response or note to any line in this Part VI	• •	• •	
36	ection A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 26		163	NO
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	2.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
	policy, and financial statements available to the public during the tax year  State the name, address, and telephone number of the person who possesses the organization's books and records			

orm 990 (2	017)										Page <b>7</b>
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part V	Ι.			<u> </u>
Section	A. Officers, Directors, Tru	stees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
ear	e this table for all persons require										-
of compensa	of the organization's <b>current</b> off tion Enter -0- in columns (D), (	E), and (F) if no	compe	nsatı	on v	vas į	paid			-	
	of the organization's <b>current</b> key		•								
vho received organization	organization's five <b>current</b> high d reportable compensation (Box and any related organizations	5 of Form W-2	and/or E	Зох 7	of F	orm	1099	-MIS	SC) of more than \$1	00,000 from the	
of reportable	of the organization's <b>former</b> office compensation from the organiz	ation and any r	elated o	rganı	zatı	ons	-				
List all operation	of the organization's <b>former dire</b> , more than \$10,000 of reportab	ectors or trust le compensation	<b>ees</b> that n from t	t rece the or	gan	l, ın ızatı	the ca	paci any	ty as a former direc v related organization	tor or trustee of the ons	9
	in the following order individua d employees, and former such p		ectors, i	ınstıtı	utior	nal t	rustee	s, of	ficers, key employe	es, highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed orgar	nizatio	on c	omp	ensate	d ar	ny current officer, di	rector, or trustee	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related		ne b	ox, ι n of or/t	t che unles ficer rust	s pers and a ee)	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	related organizations
See Additiona	al Data Table										

Form 990 (2017)														Page <b>8</b>
	A. Officers, Direct	cors, Trustees	, Key I	Empl			and	High			ed Employees	(con	tinued)	
( <b>A</b> ) Name and		(B) Average hours per week (list any hours for related	than o	one bo	ox, u an off tor/tr	t che unles ficer ruste		rson a	Repo compe fror organiza	(D) cortable censation om the zation (W-	(E) Reportable compensatio from related organizations ( 2/1099-MISO	on d (W-	(F) Estima amount o compens from to	ated of other sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/102	ر کولانا-ک	2/1000 1122	•)	organizati relati organiza	ted
See Additional Data Table												$\Box$		
						_'		上'				$\Box$		
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				<u> </u>	$\coprod$	$\vdash$	-	<del> </del>	-			$\dashv$		
			-	<del></del> '	H	$\vdash$	-	+-'	-		+	$\dashv$		
	!	-		<del>  '</del>	H	$\square$	<del>                                     </del>	+	+			+		
				$\vdash$	$\mid \uparrow \mid$	$\Box$		+				+		
	!	,						$\vdash$				$\top$		
1b Sub-Total c Total from continu					-		<b>&gt;</b>	<u>—</u>				Ŧ		
d Total (add lines 1		•		<u></u>		'	<b>&gt;</b>	_	4,	,202,839		0		786,962
	ındıvıduals (ıncludıng npensation from the o			e liste	ed at	ove	a) who	rece	eived moi	re than \$1	100,000			
	tion list any <b>former</b> o			tee, ke		mple	oyee,	or hı	ghest cor	mpensate	d employee on		Yes	No
4 For any individual organization and i	al listed on line 1a, is related organizations	the sum of repo	ortable o	compe	ensa	ition ;," c	nand comple	other te Sc	compenichedule J	sation froi for such	m the	3		No
<ul><li>individual</li><li>Did any person lis</li></ul>	sted on line 1a receiv	· · · · ·	mnensa	tion f	· ··om	• anv	· ·	· ·	organiza	tion or inc	doudual for	4	l Yes	-
	d to the organization?											5	,  !	No
Section B. Indepe	pendent Contractors ble for your five higher		- Indep	-240	-+ cc		- store	-hat	Tacolved		- +100 000 of co		rantion	
from the organiza	ation Report compen	nsation for the c	a muep calendar	year	end	ing	with o	or wit	thin the o	rganizatic	on's tax year	mpe.		
Cl. 14- Arra Slato Moagh		(A) and business addre	ess								(B) scription of services		(C Compen	nsation
Skadden Arps Slate Meaghe PO Box 1764	∍r & Flom LLP								)	Legal resea	ırch			896,275
White Plains, NY 10602 Toba Communication				—	—					Public Relat	itions	—		865,668
12931 Oak Lawn Place Oak Hill, VA 20171														
Akın Gump Strauss Hauer &	3. Feld LLP									Legal resea	arch			804,295
Dept 7247 6827 Philadelphia, PA 19170										<u></u>			<u> </u>	
Shook Hardy & Bacon LLP PO Box 843718										Policy cons	sulting fees			731,118
Kansas City, MO 64184371 Judicial Evaluation Institute										Membershij	in pymts		<del>                                     </del>	500,000
701 8TH Street NW Suite 50											p pyrrice			300,1
Washington, DC 20001		rs (including but	t not lin	utod !	to th		listed	<u> </u>		received r	nore than \$100.00	00 of	f	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization ▶ 38

Part \	VIII	I Statement of	Revenue							- age 5
		<del></del>		a respo	onse or note to any	line in this F	Part VIII			🗆
						(A) Total reve	nue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campaigr	ns	1a	L			revenue		512-514
Contributions, Giffs, Grants and Other Similar Amounts		Membership dues .		1b						
3ra nou		: Fundraising events		1c						
S. (		I Related organization			1					
Gift		Government grants (co		1e						
s. iii		All other contributions,		_ <del>_</del> 						
tio S S		and similar amounts no above		1f	42,142,289					
Contributic and Other	و	Noncash contributio								
E E										
<u>ة</u> ك	h	Total.Add lines 1a-1	f		<u> </u>	42,142	,289			
활					Business	Code				
۲۶.	2a	Meeting revenue				900099	1	1,600 1	1,600	
oğ.	b									
ٽ ج	c									
₹.	d									
ram	e f	All other program ser								
Program Service Revenue		Fotal.Add lines 2a-2f			_	11,600				
		nvestment income (ir			enterest and other	1				
	S	ımılar amounts) 🛚 .			<b>•</b>		67,834			67,834
		ncome from investme		-	ond proceeds <b>&gt;</b>					
	5 F	Royalties			· · · •					
	62	Gross rents	(ı) Rea	l	(II) Personal	-				
	- U									
	b	Less rental expenses								
	c	Rental income or				1				
		(loss)				ļ				
	a	Net rental income or	(I) Securit		(II) Other					
	7a	Gross amount	(I) Securi	les	(II) Other	-				
		from sales of assets other								
		than inventory								
	b	Less cost or other basis and								
	_	sales expenses				-				
		Gain or (loss)  Net gain or (loss)			<u> </u>	<u> </u> 				
		Gross income from fu		ents		]				
an		(not including \$ contributions reporte		of						
Other Revenue		See Part IV, line 18		a	}					
Re	b	Less direct expenses	s	b		]				
Jer.		Net income or (loss)			ents ▶	1				
<b>a</b>		Gross income from gasee Part IV, line 19		es						
				а						
		Less direct expenses		b		]				
		Net income or (loss)		activit	ies <b>&gt;</b>	1				
	10a	Gross sales of inventare returns and allowance	ory, less es							
				а						
	b	Less cost of goods s	old	b		]				
ŀ	С	Net income or (loss) Miscellaneous		invent						
	11:	<sup>a</sup> Bad debt recovery	Kevenue		Business Code 900099	_	76,000	76,00	0	
		-Bad debt recovery					,			
	h	ACC   1			561000		24,000	24,00	0	
	J	Affiliate svc charge			301000		21,000	21,00		
	c									
	C									
	اء	All other revenue .								
		Total. Add lines 11a-			<u> </u>					
		Total revenue. See					100,000			
				- '	•	42	2,321,723	111,60	0	0 67,834 Form <b>990</b> (2017)

orm	990 (2017)				Page <b>10</b>
	on 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	ınızatıons must com	plete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX			<u> 🗹</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21		·		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	3,086,294			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	2,965,531			
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits	1,679,233			
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	380,838			
	Legal	397,537			
	Accounting	57,000			
	Lobbying	8,946,691			-
	Professional fundraising services See Part IV, line 17	1,800,000			
		1,000,000			
	Investment management fees	4 222 727			
J	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,233,737			
	Advertising and promotion	2,007,538			
	Office expenses	531,966			
14	Information technology	310,061			
15	Royalties				
16	Occupancy				
17	Travel	598,961			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	724,193			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
•	Contr to other orgs	5,212,387			
i	• Contr to affiliates	3,257,172			
	: Investment impairment	2,506,402			
	1 Admin support services	1,620,000			
	e All other expenses	23,922			
	Total functional expenses. Add lines 1 through 24e	40,339,463			
	Joint costs. Complete this line only if the organization	.0,555,105			
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Form **990** (2017)

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

Net

33

34

Total net assets or fund balances

Total liabilities and net assets/fund balances

End of year

Page **11** 

# Check if Schedule O contains a response or note to any line in this Part IX

		0 0 ,		,
1	Cash-non-interest-bearing		1	
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net	11,934,711	3	11,664,000

(A) Beginning of year

Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5 Loans and other receivables from other disqualified persons (as defined under

section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . 7 Notes and loans receivable, net Inventories for sale or use . 8

Assets 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 10a basis Complete Part VI of Schedule D 10b 10c Less accumulated depreciation 11 Investments—publicly traded securities . 11 12 12 Investments—other securities See Part IV, line 11 .

13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets . . . . . 15,275,986 15 15 Other assets See Part IV, line 11 . 27,210,697 16 16

Total assets. Add lines 1 through 15 (must equal line 34) . . 17 Accounts payable and accrued expenses 17 18 Grants payable . . . 18 19 19 Deferred revenue . . .

17,528,957 29,192,957 20 20 Tax-exempt bond liabilities . . . 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Liabilities persons Complete Part II of Schedule L . 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 25

Other liabilities (including federal income tax, payables to related third parties, 25 and other liabilities not included on lines 17-24)

Complete Part X of Schedule D

0 26 Total liabilities. Add lines 17 through 25 . 26

0 Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and complete lines 27 through 29, and lines 33 and 34. 27 14,749,636 27 17,042,957 Unrestricted net assets

Fund Balances 28 12.461.061 28 12,150,000 Temporarily restricted net assets

29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958),

check here 

and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . . 30

Assets or 31 Paid-in or capital surplus, or land, building or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds 32

27,210,697

27.210.697

33

34

29,192,957

29.192.957

Form **990** (2017)

☐ Both consolidated and separate basis

2a

2b

2c

3a

3b

Yes

Yes

Nο

Nο

Form 990 (2017)

■ Separate basis ■ Consolidated basis ■ Both consolidated and separate basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Schedule O

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both

Audit Act and OMB Circular A-133?

If the organization changed its method of accounting from a prior year or checked "Other," explain in

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

### Additional Data

Software ID:

Software Version:

**EIN:** 52-2109035

Name: US Chamber Institute for Legal Reform

\_ \_\_\_\_\_\_

Form 990 (2017)

Form 000 Part III Line

Form 990, Part III, Line 4a:

Create and maintain public support for legal reform, including building alliances with groups and organizations to advance the legal reform agenda

## Form 990, Part III, Line 4b:

Research on the impact of the legal system on the economy

### Form 990, Part III, Line 4c: Ensure enactment of common sense legal reform legislation and promote the selection of pro-legal reform judges and other public officials

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation

	any hours					ustee		organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations
Kate Adams	1 00	x						0	0	0
Director		,							J	Ç
Hubert L Allen Director	1 00	x						0	0	0
Stanton D Anderson Director	1 00	×						0	0	0
		ı —	. —		. —		_			

51100001						
Stanton D Anderson	1 00	x			0	
Director		^			ŭ	
S Jack Balagıa Jr	1 00	l .			0	
Director		^			Ü	
Joshua Bolten	1 00	×			0	
Director		^			Ĭ	

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and Independent Contractors

Kım M Brunner

Chair/Director

James B Buda

Kenneth W Cole

Chair/Director

Alex Dimitrief

Director

Brackett B Denniston III

Director

Director

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation and a director/trustee) any hours organizations

	any hours				r/tr	ustee)		organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Thomas J Donohue CEO/Director	1 00	х		x				0	0	0
Randall M Ebner Director	1 00	x						0	0	0
John M Engler Director	1 00	X						0	0	0
Tom Gottschalk Director	1 00	X						0	0	0

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Director
Tom Gottschalk
Director
Michael J Harrington
Director

Trish Henry

Richard Hill

Charles J Kalıl

James F Kelleher

James Y Kerr II

Director

Director

Director

Director

Director

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation week (list person is both an officer from the from related compensation

and Independent Contractors

Lisa A Rickard

President/Director

Kenneth F Spence III

David Robinson

Director

Director

Director

Director

Jay Timmons

Michael H Ullmann

	any hours	and	a dır	ecto	r/tr	ustee	)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Susan L Lees Director	1 00	×						0	0	0
Connie Lewis Lensing Director	1 00	×						0	0	0
Steve McManus Director	1 00	х						0	0	0
William Noble	1 00	l								

173,800

0

0

Director							
Steve McManus	1 00					0	
Director		"				J	
William Noble	1 00					0	
Director		_ ^					
Jay Orlandı	1 00		·			0	
Diversion		I ^				I	

40 00

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1 00

1 00

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Steve McManus		l			l	0	
Director		, and				J	
William Noble	1 00	l			n	0	
Director		^				0	
Jay Orlandı	1 00	l			0	0	
Director		_ ^					

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2,089,682

0

0

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation from the

	any hours	and	a dır	ecto	r/tr	ustee)	)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations
Anthony Vidovich Director	1 00	×						0	0	0
Jay Brown Assistant Secretary	1 00			х				0	0	0
Lily Fu Claffee Gnrl Cnsl & Scrty	1 00			х				0	0	0
Stan M Harrell	1 00			х				0	0	0

40 00

40 00

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559,523

197,863

218,063

243,705

255,928

391,510

52,354

13,072

125,029

33,454

174,603

51,466

0

Lily Fu Claffee	1 00
Gnrl Cnsl & Scrty	2 00
Stan M Harrell	1 00
Treasurer and CFO	2 00
Harold H Kım	40 00
Exec VP	1 00

James F Martin

Sr Dir Pol Affairs

Matthew S De Cazotte

VP, Legal Reform Initiativ

SVP Intl Initiatives

Margrita J Perlman

Bryan E Quigley

SVP, Marketing & Ops

SVP, Strategic Comm

Page C Faulk

and Independent Contractors

and Independent Contractors (A)

Matthew Webb

SVP, Legal Reform Policy

Name and Title

hours per week (list any hours for related organizations below dotted line)
 40 00

(B)

Average

40 00

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Institutio

Position (do not check more than one box, unless person is both an officer and a director/trustee) employee

Х

(D)

Reportable

from the

MISC)

Reportable compensation compensation from related organization organizations (W- 2/1099-(W- 2/1099-246,565

(E)

MISC)

(F)

Estimated

amount of other

compensation

from the

organization and

related

organizations

163,184

**SCHEDULE C** 

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

(Form 990 or 990-

Department of the Treasury

Internal Revenue Service

EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

DLN: 93493314001168

Open to Public

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

Inspection

Nan	me of the organization Chamber Institute for Legal Refo	organizations Complete Part III			Employer ic	lenti	fication nu	mber
Daw	t I-A Complete if the	organization is exempt under sect	ion E01(s) or is	a sastia	52-2109035	-i	tion	
1		e organization's direct and indirect political o	<del>-</del>					f
2	Political campaign activity	expenditures (see instructions)			•	\$		1,693,029
3		l campaign activities (see instructions)						
Part	t I-B Complete if the	organization is exempt under sect	ion 501(c)(3).					
1	•	xcise tax incurred by the organization under			<b>&gt;</b>	\$		
2 3	·	xcise tax incurred by organization managers			•	\$		
	-	d a section 4955 tax, did it file Form 4720 fo	or tills year?				☐ Yes	☐ No
4a	Was a correction made?						☐ Yes	☐ No
b Par	If "Yes," describe in Part IN t I-C Complete if the	/ organization is exempt under sect	ion 501(c) ever	ant secti	on 501(c)(	31		
1	•	expended by the filing organization for section	• • • • • • • • • • • • • • • • • • • •	•		<u> </u>		593,029
2	•	ing organization's funds contributed to othe	•			Ψ,		333,023
	function activities		J		•	\$		1,100,000
3	Total exempt function expe	enditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	lıne 17b	•	\$		1,693,029
4	Did the filing organization	file <b>Form 1120-POL</b> for this year?					✓ Yes	□ No
5	organization made paymer of political contributions re	s and employer identification number (EIN) its For each organization listed, enter the a ceived that were promptly and directly deliv immittee (PAC) If additional space is neede	mount paid from the ered to a separate p	filing orga olitical org	anızatıon's fur Janızatıon, sud	ids A	lso enter the	
	(a) Name	(b) Address	(c) EIN	filing o	ount paid fror organization's If none, enter -0-		(e) Amount contribution and prom directly deli separate organization enter	ns received optly and overed to a political n If none,
(1) R	Republican State Leadership Com	mittee 1201 F ST NW Washington, DC 20004	05-0532524		275,0	00		
(2) Repu	iblican Attorneys General Associa	1747 Pennsylvania Ave NW Suite 80 Washington, DC 20006	00 46-4501717		575,0	00		
(3) R	Republican Governors Association	1747 Pennsylvania Ave NW Suite 25 Washington, DC 20006	11-3655877		250,0	00		
4								
5								
6								
		I	1	1				

If the amount on line 1e, column (a) or	(b) is: The lobbying nontaxable amount is:	
Not over \$500,000	20% of the amount on line 1e	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
0		
Over \$17,000,000	\$1,000,000	
Grassroots nontaxable amount (enter 25% o Subtract line 1g from line 1a If zero or less,	of line 1f)	
Grassroots nontaxable amount (enter 25% o	of line 1f)	

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) Total beginning in) Lobbying nontaxable amount 2a Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2017

(b)

**Amount** 

activity

Volunteers?

Media advertisements?

Other activities?

Total Add lines 1c through 1i

501(c)(6).

answered "Yes."

Dues, assessments and similar amounts from members

**Supplemental Information** 

expenses for which the section 527(f) tax was paid).

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

1

c

е f

2a

1 2

3

1

2

b

C

3

5

Part IV

Part I-A and Part I-C

Part III-A

Part III-B

Current year

Carryover from last year

expenditure next year?

Return Reference

Mailings to members, legislators, or the public? Publications, or published or broadcast statements?

Grants to other organizations for lobbying purposes?

If "Yes," enter the amount of any tax incurred under section 4912

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Did the organization agree to carry over lobbying and political expenditures from the prior year?

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

other organizations with similar missions

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

Were substantially all (90% or more) dues received nondeductible by members?

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section

and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)

Explanation

The US Chamber Institute for Legal Reform (ILR) engaged in public education activities in support of its mission, which includes representing the nation's business community, and making America's legal system simpler, fairer, and faster for everyone. In pursuit of these goals, ILR spends funds directly, or works with

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

1

2a

2b

2c 3

4

Schedule C (Form 990 or 990EZ) 2017

(a)

Yes

No

Yes

Yes

1

2

No

No

Nο

42.142.289

24,106,735

-16,555,228 7,551,507

16.600.600

-9.049.093

**SCHEDULE D** 

(Form 990)

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

2017

DLN: 93493314001168 OMB No 1545-0047

Interr	Information about Schedule D (Fo	rm 990) and its instructi	ons is at <u>www.ii</u>			spection
	me of the organization Chamber Institute for Legal Reform			Emplo	yer identificatio	n number
				52-210		
Pa	Organizations Maintaining Donor Advi Complete of the organization answered "Ye			r Accou	unts.	
		(a) Donor advise		( b	)Funds and other	accounts
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes No					
6	Did the organization inform all grantees, donors, and donor charitable purposes and not for the benefit of the donor private benefit?				ımpermıssıble	] Yes □ No
Pa	rt III Conservation Easements. Complete if the	he organization answere	ed "Yes" on Forn	n 990, P	art IV, line 7.	
1	Purpose(s) of conservation easements held by the orga	nızatıon (check all that app	oly)			
	$\square$ Preservation of land for public use (e g , recreatio	n or education) 🔲 - I	Preservation of an	historica	lly important land	area
	Protection of natural habitat		Preservation of a c	ertified h	nistoric structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation conf	tribution in the for		onservation Held at the End	of the Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easements			2b		
c	Number of conservation easements on a certified histor	ic structure included in (a)		2c		
d	Number of conservation easements included in (c) acqu structure listed in the National Register	ired after 8/17/06, and not	on a historic	2d		
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►					
4	Number of states where property subject to conservation	on easement is located 🕨				
5	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		pection, handling o	of violatio	ons,	□ No
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations	s, and enforcing co	onservatio	on easements dur	ng the year
7	Amount of expenses incurred in monitoring, inspecting,  \$ \( \)	handling of violations, and	l enforcing conser	vation ea	sements during th	e year
8	Does each conservation easement reported on line 2(d) and section $170(h)(4)(B)(u)^{2}$	) above satisfy the requirer	nents of section 1	70(h)(4)(	(B)(ı)	□ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemer	footnote to the organization				
Pai	<b>*TITI</b> Organizations Maintaining Collections Complete if the organization answered "Ye			er Simi	lar Assets.	
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final	public exhibition, educatio	n, or research in f			
b	b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items					
	(i) Revenue included on Form 990, Part VIII, line 1				<b>&gt;</b> \$	
(	ii)Assets included in Form 990, Part X				<b>&gt;</b> \$	
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS			ncıal gaın	n, provide the	
а	Revenue included on Form 990, Part VIII, line 1				<b>&gt;</b> \$	
	A					

Par	t IIII	Organizations Maintaining Col	lections of Art, F	listori	cal T	reas	ures, or	Other	Similar A	ssets (	'continued)
3		Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)									
а		Public exhibition		d		Loar	n or excha	ange prog	rams		
b		Scholarly research		е		Othe	er				
c		Preservation for future generations									
4	Provi Part )	de a description of the organization's col XIII	lections and explain	how the	ey furtl	her th	ne organız	atıon's ex	empt purp	ose in	
5		During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes No									
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		m 990	, Part	IV,	line 9, or	reporte	d an amo	unt on	Form 990, Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other intermed	ıary for	contri	butio	ns or othe	er assets i	not	□ <b>Y</b>	es 🗆 No
ь	If "Ye	es," explain the arrangement in Part XIII	and complete the fo	llowing	table		[			Amount	
c	Begir	nning balance						1c			
d	Addıt	ons during the year						1d			
е	Dıstrı	butions during the year						1e			
f	Endin	ng balance						1f			
2a	Did tl	he organization include an amount on Fo	rm 990, Part X, line	21, for	escrov	v or c	ustodial a	ccount lia	bility?		es 🗆 No
b	ĭf "Ve	es," explain the arrangement in Part XIII	Check here if the ex	vnlanati	on has	- haar	a provided	d in Part \	/TTT		
	art V	Endowment Funds. Complete if									<u> </u>
		Zildowiilelie i dildoi complete ii	(a)Current year		rior yea				(d)Three ye		(e)Four years back
1a	Beginn	ning of year balance	,				, , ,				. , .
b	Contrib	outions									
С	Net inv	vestment earnings, gains, and losses									
d	Grants	or scholarships									
е		expenditures for facilities ograms									
f	Admını	ıstratıve expenses									
g	End of	year balance									
2 a		de the estimated percentage of the curred designated or quasi-endowment	ent year end balance	(line 1	g, colu	mn (a	a)) held a	s			
b	Perm	anent endowment ▶									
С	Temp	oorarily restricted endowment <b>&gt;</b>									
	The p	percentages on lines 2a, 2b, and 2c shou	ld equal 100%								
3а	orgar	here endowment funds not in the posses nization by nrelated organizations	sion of the organizat	ion tha	t are h	eld ar	nd admını	stered fo	the	্র	Yes No
b	(ii) r	(i) unrelated organizations									
4		ribe in Part XIII the intended uses of the	· ·			_					
Pa	rt VI	Land, Buildings, and Equipme	nt.								
		Complete if the organization answ	vered "Yes" on For								
	Descri	iption of property (a) Cost or oth (investme		or other	basis (	other)	(c) Acci	umulated d	epreciation		(d) Book value
1a	Land										
b	Buildin	ngs									
c	Leaseh	nold improvements									
d	Equipn	nent									
e	Other						1				
Tota	al. Add	lines 1a through 1e (Column (d) must e	qual Form 990, Part .	X, colur	mn (B)	, line	10(c))		<b>-</b>	1	0

Schedule D (Form 990) 2017			Page <b>3</b>
Part VII Investments—Other Securities. Complete if the organ See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)	(b) Book value	(c) Me	990, Part IV, line 11b. thod of valuation -of-year market value
(1) Financial derivatives			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related.  Complete if the organization answered 'Yes' on Form 99	0, Part IV, line	11c. See Form 99	0, Part X, line 13.
(a) Description of investment (l	) Book value		thod of valuation -of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX  Other Assets. Complete if the organization answered 'Yes' on	Form 990, Part :	IV, line 11d See Form	m 990, Part X, line 15
(a) Description (1) Intercompany accounting			<b>(b)</b> Book value 17,528,957
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 ) Part X Other Liabilities. Complete if the organization answere	d 'Yes' on Form	· · · · · · · · · · · · · · · · · · ·	17,528,957 11e or 11f.
See Form 990, Part X, line 25.  1. (a) Description of liability	<b>(b)</b> Book	< value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	tnote to the orga	nization's financial -t	ptoments that reports the
2. Liability for uncertain tax positions In Part XIII, provide the text of the foor organization's liability for uncertain tax positions under FIN 48 (ASC 740) Che			

Part XI

2

3 4

b

c

Part XII

5

1

2

c

d

e

c

Part XIII

5

Schedule D (Form 990) 2017

Page 4

371,879

76,000

42,321,723

40,467,556

2,710,495

2,582,402

40.339.463

Schedule D (Form 990) 2017

37,757,061

42,245,723

а	Net unrealized gains (losses) on investments	
b	Donated services and use of facilities	
С	Recoveries of prior year grants	
d	Other (Describe in Part XIII )	
е	Add lines 2a through 2d	

Add lines **4a** and **4b** . . . . . . . . . . .

Donated services and use of facilities . . .

Prior year adjustments . . . . . .

**Supplemental Information** 

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Subtract line 2e from line 1 . . . . .

Amounts included on Form 990, Part VIII, line 12, but not on line 1

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Investment expenses not included on Form 990, Part VIII, line 7b . Other (Describe in Part XIII ) . . . . . .

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4a 4h

2a 2b

2c 2d

2a

2b

2c

2d

4a 4h

Explanation

76.000 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . . .

4c 5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu

1

2e

3

4c

5

1

2e

3

158,757

213,122

158,757

2,551,738

2.582.402

3 Subtract line 2e from line 1 . 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . b

Other (Describe in Part XIII ) .

Add lines 2a through 2d .

Return Reference

See Additional Data Table

Page <b>5</b>	chedule D (Form 990) 2017		
	ormation (continued)	Part XIII Supplemental Info	
	Explanation	Return Reference	

Schedule D (Form 990) 2017

### **Additional Data**

Software ID: Software Version:

**EIN:** 52-2109035

Name: US Chamber Institute for Legal Reform

**Supplemental Information** 

Return Reference	Explanation
Part X, Line 2	ASC 740 footnote from 2017 audit Management's analysis of uncertain tax positions as required under Financial Accounting Standards Board Accounting Standards Codification Topic (A SC) 740, Income Taxes, determined that ILR had no uncertain tax positions, and as such, no liability has been recorded as of December 31, 2017 or 2016 Management does not anticipate any material changes in this position in the next 12 months ILR, CFR, MCR, and Article III are subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress Management believes ILR, CFR, MCR, and Article III are no longer subject to income tax examinations for years prior to 2014

upplemental Information				
Return Reference	Explanation			
Part XI, Line 2d - Other Adjustments	Affiliated org rev consolidated for financial statement purpose \$45,336 Interest revenue f rom agency transaction on affiliate return \$167,786			

S

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pplemental Information				
Return Reference	Explanation			
Part XI, Line 4b - Other Adjustments	Bad debt recovery \$76,000			

S

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upplemental Information				
Return Reference	Explanation			
Part XII, Line 2d - Other Adjustments	Affiliated org exp consolidated for financial statement purpose \$2,551,738			

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upplemental Information				
Return Reference	Explanation			
Part XII, Line 4b - Other Adjustments	Write off of investment in subsidiary \$2,506,402 Bad debt recovery \$76,000			

S

enie GRAFIIIC prii	<u> 1t - DO NOT I</u>	PROCESS	As Filed Data -			DLN: 93493314001168		
SCHEDULE F (Form 990)	State	ement of	ates	OMB No 1545-0047				
(F01111 990)	► Compl	lete if the organ	ızatıon answered "\ ► Attach t	ıne 14b, 15	15, or 16. <b>2017</b>			
Department of the Treasury Internal Revenue Service	▶ Informa	ition about Sche		and its instructions is at wu	vw.irs.gov/	form990.	Open to Public Inspection	
Name of the organizatio						Employer iden	tification number	
JS Chamber Institute fo	r Legal Reform				52-2109035			
	<b>Information</b> ), Part IV, line		s Outside the U	Jnited States. Comple	te if the o	organization a	nswered "Yes" to	
1 For grantmake	<b>rs.</b> Does the or	ganızatıon ma	intain records to	substantiate the amount	of its gra	nts and	_	
other assistance	, the grantees'	eligibility for t	he grants or assis	stance, and the selection	criteria u	sed		
to award the gra	nts or assistan	ce <sup>?</sup>					☐ Yes ☐ No	
2 For grantmake outside the Unite		Part V the org	janization's proce	dures for monitoring the	use of its	grants and otl	her assistance	
3 Activites per Regi	on (The followir	ng Part I, line 3	table can be dupli	cated if additional space is	needed )			
(a) Regioi	١	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region		program s spec	y listed in (d) is a ervice, describe fic type of (s) in region	(f) Total expenditures for and investments in region	
( 1) See Add'l Data								
( 2)								
(3)								
(4)								
( 5)								
3a Sub-total b Total from continu Part I	ation sheets to Ba and 3b)		0 18				1,211,619 0 1,211,619	

(3)

(4)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as taxexempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . .

(13) (14)

(15) (16)

(17) (18) Page **3** 

Schedule F (Form 990) 2017

Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
(1)							, , ,		
(2)									
(3)									
(4)									

( 2)				
(3)				
(4)				
( 5)				
( - )				

( 3)				
(4)				
( 5)				
( 6)				
(7)				
(8)				

(4)				
( 5)				
( 6)				
(7)				
(8)				
(9)				
( 10)				
(11)				
( 12)				

Sche	dule F (Form 990) 2017		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	□Yes	<b>☑</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	□Yes	<b>☑</b> No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	<b>☑</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	Yes	<b>✓</b> No

Schedule F (Form 990) 2017 Page <b>5</b>					
Provide the information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting mandless of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to part any additional information (see instructions).					
Return Reference		Explanation			
Part I, line 3		Schedule F Part I We use the accrual method of accounting on all of our transactions			

#### **Additional Data**

Europe

#### Software ID: Software Version:

**EIN:** 52-2109035

Name: US Chamber Institute for Legal Reform

Building of alliance for

global forum shopping

89,760

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	offices in the region	employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) lotal expenditures for region
East Asıa				Building of alliance for global forum shopping	11,269

engagements

Seminars and speaking

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) East Asia Policy analysis in East Asia 86.267 2 | Program services Europe 16 Program services Policy analysis in Europe 1,024,323

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SCHEDULE G

licensing

(Form 990 or 990-EZ)

Department of the Treasury

DLN: 93493314001168

OMB No 1545-0047

### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990. **Employer identification number** Name of the organization US Chamber Institute for Legal Reform 52-2109035 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations Solicitation of government grants ✓ Phone solicitations Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to (ii) Activity fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No Chamber of Commerce of the Fundraising USA 41,978,289 1,800,000 40,178,289 Yes 1615 H ST NW Washington, DC 20062 3 10 Total 41,978,289 1,800,000 40,178,289

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or

	than \$15,000 of fundraising e gross receipts greater than \$5	vent contributions and			
	gross receipts greater than \$2	(a)Event #1	<b>(b)</b> Event #2	(c)Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col <b>(a)</b> through col <b>(c)</b> )
e					
Revenue					
Rev					
	1 Gross receipts				
	2 Less Contributions				
	4 Cash prizes				
တွ	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs				
ង្គ	7 Food and beverages				
닿	8 Entertainment				
ă	9 Other direct expenses				
	10 Direct expense summary Add lines 4 t	through 9 in column (d)			
	11 Net income summary Subtract line 10			•	
Par	<b>t III Gaming.</b> Complete if the organization on Form 990-EZ, line 6a.	anization answered "Ye	es" on Form 990, Part I	IV, line 19, or reported	more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
æ	1 Gross revenue				
l sec	2 Cash prizes				
Expenses					
ሿ	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
		☐ Yes %	☐ Yes%	☐ Yes%	
	<b>6</b> Volunteer labor	☐ No	☐ No	☐ No	
	7 Direct expense summary Add lines 2 t	hrough 5 in column (d)			
	8 Net gaming income summary Subtract	t line 7 from line 1, colum	ın (d)	<b>.</b>	
9	Enter the state(s) in which the organizati	on conducts gaming activ	ities		
a	Is the organization licensed to conduct ga	aming activities in each of	these states?		☐ Yes ☐ No
b	If "No," explain				
10-	Were any of the organization's saming lie				
10a b	Were any of the organization's gaming lic If "Yes," explain		a or terminated during th	e lax year <sup>,</sup>	☐ Yes ☐ No
					I

Sche	dule G (Form 990 or 990-EZ) 2017					P	Page <b>3</b>
l <b>1</b>	Does the organization conduct gaming	activities with nonmember	s <sup>?</sup>		Yes	□ No	
L2	Is the organization a grantor, beneficial formed to administer charitable gamin		member of a partnership or other entity		□Yes		
L3	Indicate the percentage of gaming acti	vity conducted in					
а	The organization's facility			13a			%
b	An outside facility			13b			%
L <b>4</b>	Enter the name and address of the per	son who prepares the orga	nization's gaming/special events books and r	ecords			
	Name •						
_	Address >						
.5a	Does the organization have a contract revenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b	If "Yes," enter the amount of gaming r amount of gaming revenue retained by			he			
С	If "Yes," enter name and address of th	e thırd party					
	Name ►						
	Address ▶						
.6	Gaming manager information						
	Name ►						
	Gaming manager compensation ► \$						
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
.7	Mandatory distributions						
а	Is the organization required under state retain the state gaming license?	e law to make charitable di	stributions from the gaming proceeds to		□Yes	П.,	
ь	3 3	red under state law distribi	uted to other exempt organizations or spent		∟ Yes	∐ No	
	in the organization's own exempt activ						
Par			cions required by Part I, line 2b, column licable. Also provide any additional info				5).
	Return Reference		Explanation				
		1	<u> </u>	lule G (F	orm 990 or	990-FZ) 2	2017

efil	efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493314001168								
Sch	edule	ı J	Compensation Information	ОМ	IB No	1545-0	0047		
(Form 990)			For certain Officers, Directors, Trustees, Key Employees, and Higl Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, Attach to Form 990.	line 23.	2017				
•	tment of the al Revenue		► Information about Schedule J (Form 990) and its instructions i www.irs.gov/form990.	s at 0		o Pul			
	ne of the			Employer identificat					
US (	Chamber Ir	nstitute fo	or Legal Reform	52-2109035					
Pa	rt I	Questic	ons Regarding Compensation						
						Yes	No		
1a			opiate box(es) if the organization provided any of the following to or for a person listed ection A, line 1a Complete Part III to provide any relevant information regarding thes						
	_		s or charter travel Housing allowance or residence for p	personal use					
			companions $\square$ Payments for business use of person						
			nification and gross-up payments  Health or social club dues or initiation						
	⊔ D	Discretion	nary spending account Personal services (e g , maid, chaufi	feur, chef)					
b			xes in line 1a are checked, did the organization follow a written policy regarding paym all of the expenses described above? If "No," complete Part III to explain	ent or reimbursement	<b>1</b> b	Yes			
2			ation require substantiation prior to reimbursing or allowing expenses incurred by all	1-2	2	Yes			
	airector	s, truste	es, officers, including the CEO/Executive Director, regarding the items checked in line	lar					
3	organiza	ation's C	If any, of the following the filing organization used to establish the compensation of the EO/Executive Director Check all that apply Do not check any boxes for methods and organization to establish compensation of the CEO/Executive Director, but explain it						
	useu by	, a relace		ii i dic III					
		•	ation committee						
		•	ent compensation consultant  Compensation survey or study						
	□ F	orm 990	of other organizations $\square$ Approval by the board or compensation	tion committee					
4		the year, organıza	, did any person listed on Form 990, Part VII, Section A, line ${f 1a}$ , with respect to the ${f fi}$	ling organization or a					
а	Receive	a severa	ance payment or change-of-control payment?		4a		No		
b	Participa	ate in, or	r receive payment from, a supplemental nonqualified retirement plan?		4b	Yes			
С	-		r receive payment from, an equity-based compensation arrangement? of lines 4a-c, list the persons and provide the applicable amounts for each item in Part	III	4c		No		
	0 1 5	047 \/0	) F04( )(4)						
5	-		), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.  ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any						
•			ontingent on the revenues of						
а	The ora	janizatior	n?		5a				
b	-		anization?		5b				
	If "Yes,	" on line	5a or 5b, describe in Part III						
6			ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any ontingent on the net earnings of						
а	The org	janızatıor	n?		<b>6</b> a				
b	Any rela	ated orga	anization?		6b				
			6a or 6b, describe in Part III						
7			ed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed escribed in lines 5 and 67 If "Yes," describe in Part III	İ	7				
8		to the in	nts reported on Form 990, Part VII, paid or accured pursuant to a contract that was nitial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," de	escribe	8				
9	If "Yes" 53 4958		8, did the organization also follow the rebuttable presumption procedure described in	Regulations section	9				
For F	Panerwo	rk Redu	uction Act Notice, see the Instructions for Form 990. Cat No 5	0053T Schedule J	(Forn	990)	2017		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in other deferred benefits (B)(I)-(D)column (B) reported (i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 Lisa A Rickard 592,766 (i) 1,200,000 296,916 155,400 18,400 2,263,482 0 President/Director 0 0 0 0 0 0 0 (ii) 2 Harold H Kım 350,247 (i) 185,000 24,276 28,350 24,004 611,877 0 Exec VP 0 0 0 0 0 0 0 (ii) 3 James F Martin 168,623 (i) 29,240 0 12,861 211 210,935 Ω Sr Dir Pol Affairs 0 0 0 0 0 0 0 (ii) 4 Matthew S De Cazotte 217,413 (i) 0 650 124,803 226 343,092 0 SVP Intl Initiatives 0 0 0 0 0 0 0 (ii) 5 Page C Faulk 242,827 (i) 0 878 0 25,759 7,695 277,159 VP, Legal Reform Initiativ 0 0 0 0 0 0 0 (ii) 6 Margrita J Perlman 196,256 (i) 0 0 59,672 154,534 20,069 430,531 SVP, Marketing & Ops 0 0 0 0 0 0 0 (ii) 7 Bryan E Quigley 311,510 (i) 80,000 0 28,350 23,116 442,976 0 SVP, Strategic Comm 0 0 0 0 0 0 0 (ii) 8 Matthew Webb 246,565 (i) 0 0 19.835 409.749 0 143.349 SVP, Legal Reform Policy 0 (ii) 0 0 0 0 0 0

Schedule J (Form 990) 2017	Schedule J (Form 990) 2017					
Part III Supplemental Info	ormation					
Provide the information, explanation	, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference	Explanation					
Part I, Line 1a	Four of the executives listed in Part VII of the core form utilized first class travel at least once. One person listed on Part VII of the core form has traveled with companions for business purposes. None of these expenses are treated as taxable benefits. Travel for companions is available for business purposes only, when companions are invited and expected to attend. Social club dues are available to the President for business use only. They are treated as taxable benefits and gross up payments are made on this amount.					
Part I, Line 3	The US Chamber Institute for Legal Reform relied on the performance and compensation committee of an affiliated organization that used the methods described in the Schedule O section for Part VI Question 15a to establish the top management officials' compensation					
Part I, Line 4b	Supplemental Pension list Lisa Rickard 221,487 Harold Kim 24,276 The Supplemental Pension Plan provides cash payments to participants based on a formula that coordinates with the benefits that cannot be paid by the Retirement Plan due to the qualified plan pay cap under the law. These benefits are calculated and paid					

annually, there is no deferred component

Schedule J (Form 990) 2017

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Schedule L (Form 990 or 990-	Complet	Transactions with Interested Persons  Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.  Attach to Form 990 or Form 990-EZ.								1545-			
Department of the Trea- Internal Revenue Servic	surv	ormation abo	out Schedu	ıle L (Form 99 <u>www.irs.gov</u>		) and its inst	ructior	ıs is	at	(	Open	to Pu	ıblic
Name of the orga US Chamber Institut									<b>/er ide</b> 9035	entifica	ation r	numbe	:r
	ss Benefit Trar ete ıf the organıza												
	Name of disquali			Relationship be				(c) D		tion of		) Corre	ected?
Part II Loa Com repo	nount of tax, if and nount of tax, if and nount of the organization with organization	From Inter- ization answe n Form 990, F (c) Purpose	ested Per red "Yes" or Part X, line (d) Loan	r <b>sons.</b> n Form 990-EZ, 5, 6, or 22				t IV, In	( Appro boa	<b>h)</b> ved by rd or	(	ganızat i)Writt greeme	ten
			То	From	-		Yes	No	comm	No No	Yes	ı	No
Total Part III Gran	nts or Assistar	nce Benefit	ing Inter		≻ \$ ns.								
Com (a) Name of Intere			between n and the	es" on Form 9		(d) Type	of assis	stanc	e	<b>(e)</b> Pu	rpose (	of assis	stance

**Explanation** 

Schedule I (Form 990 or 990-F7) 2017

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference

#### **Additional Data**

(1) Schedule B number 5

(1) Schedule B number 13

#### Software ID: Software Version:

ware version: EIN:

Name: US Chamber Institute for Legal Reform

804,295

fees

fees

See Part V Legal policy consulting

240,592 | See Part V Legal policy consulting

(e) Sharing

organization's revenues?

No

No

No

Yes

52-2109035

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons							
(a) Name of interested person	(b) Relationship between interested	(c) Amount of transaction	(d) Description of transaction				

person and the

organization

Substantial contributor

Substantial contributor

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (d) Description of transaction (a) Name of interested person (b) Relationship (c) Amount of (e) Sharing between interested transaction person and the organization's revenues? organization Yes No (3) Schedule B number 25 Substantial contributor 261,866 | See Part V Legal policy consulting Nο fees (1) Schedule B number 40 Substantial contributor 246,234 | See Part V Communications No

consulting fees

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's revenues? organization Yes No (5) Schedule B number 41 Substantial contributor 426,731 | See Part V Policy consulting fees Nο (1) Schedule B number 76 Substantial contributor 340,496 | See Part V Policy consulting fees No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (d) Description of transaction (a) Name of interested person (b) Relationship (c) Amount of (e) Sharing between interested transaction person and the organization's organization revenues? Yes Nο

896,275 | See Part V Legal policy consulting

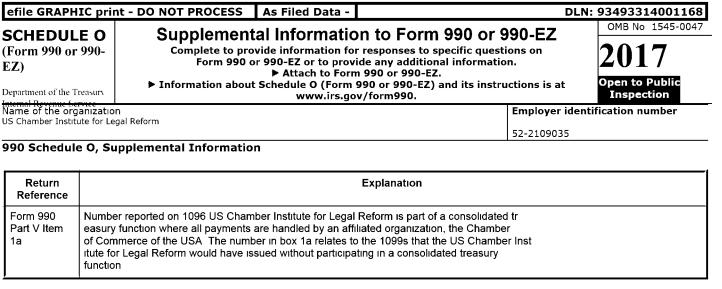
fees

No

				 1,,,
(7) Schedule B number 79	Substantial contributor	731,118	See Part V Policy & research consulting fees	No

Substantial contributor

(1) Schedule B number 80



Return Explanation

Form 990
Part V Item
2a
Number reported on W-3 US Chamber Institute for Legal Reform is part of a consolidated pay
roll function where all payroll functions are handled by an affiliated organization, the C
hamber of Commerce of the USA. The number in box 2a relates to the W-2s that the US Chambe
r Institute for Legal Reform would have issued without participating in a consolidated pay
roll function.

Return Explanation
Reference

Form 990,	Stanton D Anderson, Thomas J Donohue, Lily Fu Claffee, Stan M Harrell, and Jay Brown have a business relationship
Part VI,	
Section A,	
line 2	

Return Explanation
Reference

Form 990,
Part VI,
Section B,
In accordance with the Audit Committee charter, the draft Form 990 was provided in advance to the Audit Committee members, and reviewed individually with each member prior to filin
g The Audit Committee performs this function pursuant to a delegation from the Board of D irectors. The board receives the most recently completed tax return at the next regularly.

990 Schedule O. Supplemental Information

scheduled meeting

's conflicts of interest policies

Return Reference	Explanation
Form 990, Part VI, Section B, Iine 12c	We annually notify staff of the Standards of Conduct and Ethics policy, which includes a requirement that any transaction or relationship that is reasonably expected to give rise to an actual or apparent conflict of interest be brought to the attention of a supervisor, a senior manager in the Talent Solutions department or the Office of the General Counsel In addition, we issue an annual written questionnaire to all members of the board of directors asking for information on potential conflicts of interest, which is gathered by the Chief Financial Officer All reports of potential conflicts will be evaluated by the General Counsel in consultation with other senior management and staff, as appropriate Any conflicts of interest involving board members or staff are resolved in accordance with the ILR

Funlanation

Return Reference	Explanation
Form 990, Part VI, Section B, line 15b	Part VI Section B, Line 15a The process for determining total compensation of the Presiden t, who is a direct report of the US Chamber of Commerce President/CEO, and whose compensation is charged to the Institute for Legal Reform, is as follows. Total compensation is reviewed annually by an independent compensation consultant. The consultant prepares a compensation study primarily utilizing, as available, Forms 990 and surveys of comparable organizations with similar responsibilities. Based on this information, total compensation is determined by the US Chamber of Commerce's President/CEO and US Chamber of Commerce's Performance and Compensation Committee on an annual basis. Part VI Section B, Line 15b The process for determining total compensation for the key employee, whose compensation is charged to the Institute for Legal Reform, is as follows. An independent compensation consultant provides supporting data and analysis to the US Chamber of Commerce's Senior Executive Vice. President and the Vice President, Talent Solutions who establishes job classifications and compensation ranges for all employees. Based on this information, individual total compensation is determined by the individual's supervisor and the US Chamber of Commerce's Senior Executive Vice President and the Vice President, Talent Solutions on an annual basis.

Return

Reference	=	
Form 990, Part VI, Section C, line 19	The Form 990 is made available to any member of the public who requests a copy. Any reques tor is forwarded to the Administrative Director of Finance of the Chamber of Commerce of the USA, who will forward a copy of the document to the requestor. The organization's gover ning documents were made available with the organization's Form 1024 on June 26, 1998. The conflict of interest policy is not available to the public. The organization's financial statements are not made available to the public but are reflected in the financial data of the Form 990. Form 990, Part IV Question 12 Auditing of financial statements. The US Chamber of IV Question 12 Auditing of the US Chamber of Legal Reform is an affiliated organization within the consolidated financial statements of the US Chamber of Commerce and Affiliates.	

Explanation

Return Explanation
Reference

Form 990, Policy and research consulting 4050206 Temp salaries and recruiting 183531

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493314001168 OMB No 1545-0047 SCHEDULE R **Related Organizations and Unrelated Partnerships** 2017 (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service **Employer identification number** Name of the organization US Chamber Institute for Legal Reform 52-2109035 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (b) (c) (d) (e) (f) Name, address, and EIN (if applicable) of disregarded entity Legal domicile (state End-of-year assets Direct controlling Primary activity Total income or foreign country) entity (1) Article III Films LLC DE 0 0 US Chamber Institute for Legal Film production 1615 H ST NW Reform Washington, DC 20062 26-3139751

				1			
Part II Identification of Related Tax-Exempt Organizations (related tax-exempt organizations during the tax year.	Complete if the org	anızatıon answered	"Yes" on Form 990	, Part IV, line 34 be	cause it had one or	more	
related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	Section (13) co	g) 1512(b) Introlled
						Yes	No
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	•	Cat No 5013	35Y		Schedule R (Form	990) 20	017

(a) Name, address, and EIN of related organization			ary Legal E vity domicile cor	(d) Direct controlling entity	(e) Predomin income(rel unrelate excluded f tax und sections 5 514)	ated, total inco ed, from er 512-				(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera mana partn	alor Per jing ow	(k) rcentag rnersh
			+ +		1		+	Yes	No		Yes	No	
			1										
because it had one or more rel  (a) Name, address, and EIN of		a corporation	on or trust (c) <sub>egal</sub>	during th	e tax yea  (d) controlling	r. (e) Type of entity	(f) Share of total	Share	(g) of end-c	(h of- Percer	) ntage		(ı) on 512
related organization		(state	micile or foreign untry)	entity		(C corp, S corp, or trust)	income	year assets		ownership		er Yes	ntity?
The Madison County Record Inc	Newspaper publishing		IL	US Cha Institut Reform	te for Legal	С	45,336		4,32	2 100 00	0 %	Yes	
shington, DC 20062 -1452063													

Schedule R (Form 990) 2017		Pa	ge <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	<b>1</b> i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10		No
p Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
<b>q</b> Reimbursement paid by related organization(s) for expenses	<b>1</b> q		No
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s		No

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		<b>(k)</b> Percentage ownership
			514)	Yes	No			Yes	No		Yes	No			
													_		
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017		

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017